

PART B - FEE(S) TRANSMITTAL

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23448 7590 03/27/2003

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EXAMINER'S CERTIFICATE

I hereby certify that I am mailing the enclosed documents to the Commissioner for Patents on the date specified in an envelope addressed to the Mail Stop (see Box 1), Commissioner for Patents, PO Box 1400, Alexandria, VA 22313-1400, and Express Mailed under the provisions of 37 CFR 1.10.

[Signature]
 L. Joseph Lichten
 June 23, 2003
 Date

PTO RECEIPT

June 23, 2003

06/23/2003 LUNDBINE 00000068 10047788

01 FC:2501
 02 FC:1504

650.00 IP
 300.00 IP



APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/047,788	01/14/2002	Martin Walter Dalton	4058-122	5602

TITLE OF INVENTION: REMOTE SHUT-OFF VALVE

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
Nonprovisional	YES	\$650	\$300	\$950	06/27/2003

EXAMINER	ART UNIT	CLASS-SUBCLASS
BASTIANELLI, JOHN	3754	251-030010

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
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2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

- 1 Steven J. Hultquist
- 2 Marianne Fuierer
- 3 Yongzhi Yang

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Please check the appropriate assignee category or categories (will not be printed on the patent) ☐ individual ☐ corporation or other private group entity ☐ government

4a. The following fee(s) are enclosed:

- ☒ Issue Fee
- ☐ Publication Fee
- ☐ Advance Order - # of Copies _____

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- ☒ A check in the amount of the fee(s) is enclosed.
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(Authorized Signature)

(Date)

Steven J. Hultquist

June 23, 2003

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